# A STEPWISE APPROACH TO CHANGING THE LANDSCAPE OF PHARMACIST EDUCATION ON PAIN AND PALLIATIVE CARE:

A REPORT FROM THE STRATEGIC PLANNING SUMMIT FOR THE ADVANCEMENT OF PAIN AND PALLIATIVE CARE PHARMACY

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## Introduction

Currently education of pharmacists and pharmacy students on pain and palliative care (PPC) is inconsistent in both general practice, as well as the curriculum of professional degree programs. Over the past 20 years, pharmacists' involvement in the provision of care to patients requiring pain and symptom management has grown considerably.

### **About the Summit**

- Held October 1<sup>st</sup> and 2<sup>nd</sup>, 2009 at Southern Illinois University Edwardsville in Edwardsville, IL
- Made possible by a generous, multi-year grant from the Mayday Fund of New York
- Invite stakeholders in PPC to attend and reach consensus and develop recommendations on:
  - a) Educational content in professional degree programs for pharmacy
  - b) Educational content in post-graduate clinical training programs for pharmacy
  - c) Core and practice-dependent minimum competencies for pharmacists on PPC
  - d) Appropriate credentialing practices for those pharmacists practicing in PPC
- Meeting split up into 6 workgroups with specific goals and objectives

#### Table 1. Breakouts, facilitators, goals, and objectives.

| Workgroup   | Facilitator                                     | Corresponding Summit Goal   | Workgroup Objective  |
|---|---|---|--|
| Standards and<br>Assessment                       | Rebecca Finley,<br>PharmD, MS                   | Increase didactic and experiential exposure to pain and palliative care   | Review and recommend standards and assessment methods via ACPE, AACP, and NABP   |
| Curriculum  | Mary Lynn<br>McPherson,<br>PharmD, BCPS,<br>CPE | Increase didactic and experiential exposure to pain and palliative care   | Review current International Association for the Study of Pain (IASP) curricular recommendations as they apply to didactic and experiential education    |
| Post-graduate<br>Residency<br>Standards           | David Craig,<br>PharmD, BCPS,<br>CPE            | Develop / review standards of PGY-1 & PGY-2 residencies as they relate to pain and palliative care                        | Develop core and elective standards for PGY-1 and overlapping PGY-2 residencies. Review current ASHP PGY-2 pain and palliative care residency standards  |
| Core Content,<br>Certificate<br>Program           | Suzanne Nesbit,<br>PharmD, BCPS,<br>CPE         | Improve skills, attitudes, and knowledge<br>base of practicing licensed pharmacists<br>regarding pain and palliative care | Develop core content for EPEC / ELNEC style training program   |
| Specialized<br>Content,<br>Certificate<br>Program | Scott Strassels,<br>PharmD, PhD,<br>BCPS        | Improve skills, attitudes, and knowledge base of practicing licensed pharmacists regarding pain and palliative care       | Develop sub-group content for EPEC / ELNEC style training program for specific practice settings (i.e. hospital, community, LTCF, clinic based practice) |
| Credentialing                                     | Lee Kral, PharmD,<br>BCPS                       | Reach consensus on credentialing for<br>pharmacists with pain and palliative care<br>therapeutic expertise                | Review currently available credentialing opportunities for pharmacists and processes for collaboration for Board of Pharmaceutical Specialty petitioning |

## **Summary of Recommendations**

- Curricular PPC competencies for professional degree programs in pharmacy should consider all
  coursework, including required didactic, elective didactic, required experiential, and elective or
  selective experiential education. Consensus recommendations on PPC competencies, model syllabi for
  dedicated courses, and recommended curricular content are provided.
- In order to effect change in pharmacy professional degree programs, collaboration must be sought
  from degree program accreditation bodies, state and national licensing boards as well as professional
  organizations representing pharmacy educators. Consensus recommendations for pursuing these
  opportunities are outlined.
- Pharmacists seeking formal post-graduate clinical training outside of a PPC specialty require a core understanding of this practice area. Consensus recommendations on general competencies for these programs are presented.
- Pharmacists providing patient care in all practice settings require a core understanding of PPC.
   Consensus recommendations on basic minimum competencies for practicing pharmacists on PPC are presented as a framework for a continuing education certificate program.
- Unique practice settings often require specialized skills as it relates to PPC. Consensus recommendations outlining the individual practice areas and subsequent skill sets are provided.
- Recognition of expertise for pharmacists with advanced understanding of PPC is paramount from the
  perspective of the patient, the payer, the employer, and the health care team. Consensus
  recommendations are provided on the development and provision of such recognition.
- The Executive Summary and full consensus recommendations may be downloaded at www.pharmacypainsummit.com

## Conclusions

- Pharmacists are an integral part of the interdisciplinary care of patients in need of pain management and/or palliative care.
- Implementation of these recommendations within Schools of Pharmacy curricula, residency training objectives, and future continuing education programming is essential.
- Specialty board certification for those seeking advanced skills or knowledge in pain and/or palliative care is warranted.





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